

RLC Local Adviser Procedures and Responsibilities

It is required of each local adviser attending the RLC to read and sign a copy of this form. This form must be **submitted to the Regional Host by the third Friday in January** for all advisers in attendance.

1. Local advisers and other chapter chaperones are expected to assist in the administration of competitive events, workshops, etc. onsite at RLC. This ensures that seamless management of competitive events; as well as the safety of all delegates at RLC. **This role is extremely important!**
2. Chapters will be disqualified for not adhering to the 15:1 chaperone policy ratio.
3. Local advisers are responsible for knowing the whereabouts of all their students at all times. Each local adviser should establish a policy with his/her students prior to the conference in order to meet this regulation.
4. Local advisers must have with them at the conference a list of their students, as well as home telephone numbers and parent's or guardian's names.
5. Use of tobacco, consumption of alcohol, or illegal possession of controlled substances will not be allowed at any conference activities.
6. Nametags will be worn at all times.
7. Local advisers are responsible for supervision of their delegates' conduct and shall be available to their students at all times.
8. The local principal and/or designated administrator will be contacted in emergency situations if the local adviser cannot be located within a reasonable amount of time or is unable to give proper amount of supervision. Student emergencies include: accidents, possession of drugs or alcohol, breaking conference rules, family emergencies and any other situation designated as an emergency.

I have read and fully understand the FBLA Regional Leadership Conference LOCAL ADVISER PROCEDURES AND RESPONSIBILITIES and agree to comply with these guidelines.

Adviser's Signature	Principal's Signature
Adviser's Printed Name	Principal's Printed Name
Chapter Name	

In case of emergency, the following local administrators should be contacted:

1 st Contact	2 nd Contact
Name	Name
Title	Title
School Phone (Area/No.) () -	School Phone (Area/No.) () -
Home Phone (Area/No.) () -	Home Phone (Area/No.) () -

NOTE: A COPY OF THIS FORM MUST BE SUBMITTED FOR EACH ADVISER ATTENDING THE SLC. ORIGINAL FORMS MUST BE SUBMITTED TO THE REGIONAL HOST SCHOOL BY THE THIRD FRIDAY IN JANUARY.